



Last Updated: 03/09/2022

## **Rate Changes for Home and Community Based Services and EPSDT Nursing and Personal Care/Respite Services – Effective July 1, 2015**

The purpose of this memo is to notify providers of rate changes to Home and Community-Based Services (HCBS) and Early Periodic Screening, Diagnosis, and Treatment (EPSDT) Program nursing and personal care/ respite services for dates of service on or after July 1, 2015 as prescribed in the 2015 Acts of Assembly, Chapter 665. Also, effective July 1, 2015, Culpeper and Rappahannock Counties will be considered Northern Virginia (NOVA) localities for purposes of reimbursement of HCBS and EPSDT services.

### **Rate Increases**

In accordance with Item 301.MMMM of the 2015 Acts of Assembly, Chapter 665, reimbursement rates shall be increased by 2.0 percent for congregate residential services (except sponsored residential). All sponsored residential services must be billed under procedure code T2033 effective July 1, 2015. Sponsored residential providers that have not yet converted their billing code from procedure code 97535 to T2033, will need to complete this by June 1, 2015 by submitting a service modification, an Individual Service Authorization Request (ISAR), through the Intellectual Disability On-Line System (IDOLS) to accomplish this change. Sponsored residential providers who have an individual approved for the exceptional supports rate should similarly convert their billing code to T2033 with modifier U1.

Also, Item 301.MMMM authorizes increases of 5.5 percent for in-home residential services, 2.0 percent for day support services and prevocational services, and 10.0 percent for therapeutic consultation services. This item also increases the reimbursement rates for skilled nursing services in the Intellectual Disability (ID) and the Individual and Family Developmental Disabilities Support (IFDDS) waivers by 15.7 percent.

Rates for nursing services in the EPSDT program are increased by approximately 6.0 percent effective July 1, 2015 to be identical to private duty nursing rates in the Technology Assisted Waiver.



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Item 301.NNNN of the Acts of Assembly increases the rates for agency and consumer-directed personal care, respite care and companion services by 2.0 percent, effective July 1, 2015.

The following table describes rates in effect and the change in rates to be implemented for dates of service on or after July 1, 2015:

| National Code | Modifier | Code Description                              | Region | Rates Effective 7/1/2014 - 6/30/2015 | Rates Effective 7/1/2015 | Rate Increase |
|---------------|----------|---|--------|--------------------------------------|--------------------------|---------------|
| 97139         |          | Therapeutic Consultation                      | NOVA   | \$62.77                              | \$69.05                  | 10.0%         |
| 97139         |          | Therapeutic Consultation                      | ROS    | \$54.58                              | \$60.04                  | 10.0%         |
| 97535*        |          | Congregate Residential Support                | NOVA   | \$17.36                              | \$17.71                  | 2.0%          |
| 97535*        |          | Congregate Residential Support                | ROS    | \$15.10                              | \$15.40                  | 2.0%          |
| 97535*        | U1       | Congregate Residential - Exceptional Supports | NOVA   | \$21.70                              | \$23.13                  | 2.0%          |
| 97535*        | U1       | Congregate Residential - Exceptional Supports | ROS    | \$18.88                              | \$19.26                  | 2.0%          |
| 97537         |          | Day Support, Regular Intensity                | NOVA   | \$30.12                              | \$30.72                  | 2.0%          |
| 97537         |          | Day Support, Regular Intensity                | ROS    | \$26.19                              | \$26.71                  | 2.0%          |
| 97537         | U1       | Day Support, High Intensity                   | NOVA   | \$42.87                              | \$43.73                  | 2.0%          |
| 97537         | U1       | Day Support, High Intensity                   | ROS    | \$37.27                              | \$38.02                  | 2.0%          |
| H2014         |          | In-Home Residential Support                   | NOVA   | \$22.59                              | \$23.83                  | 5.5%          |
| H2014         |          | In-Home Residential Support                   | ROS    | \$19.65                              | \$20.73                  | 5.5%          |
| H2025         |          | Pre-vocational Services, Regular Intensity    | NOVA   | \$30.12                              | \$30.72                  | 2.0%          |
| H2025         |          | Pre-vocational Services, Regular Intensity    | ROS    | \$26.19                              | \$26.71                  | 2.0%          |



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|         |    |  |      |         |         |       |
|---------|----|--|------|---------|---------|-------|
| H2025   | U1 | Pre-vocational Services, High Intensity              | NOVA | \$42.87 | \$43.73 | 2.0%  |
| H2025   | U1 | Pre-vocational Services, High Intensity              | ROS  | \$37.27 | \$38.02 | 2.0%  |
| T1002** |    | Skilled Nursing Services/RN                          | NOVA | \$7.80  | \$9.02  | 15.7% |
| T1002** |    | Skilled Nursing Services/RN                          | ROS  | \$6.42  | \$7.43  | 15.7% |
| T1003** |    | Skilled Nursing Services/LPN                         | NOVA | \$6.76  | \$7.82  | 15.7% |
| T1003** |    | Skilled Nursing Services/LPN                         | ROS  | \$5.57  | \$6.44  | 15.7% |
| S9123   |    | EPSDT Nursing Care in Home/RN                        | NOVA | \$31.19 | \$33.08 | 6.0%  |
| S9123   |    | EPSDT Nursing Care in Home/RN                        | ROS  | \$25.68 | \$27.24 | 6.0%  |
| S9124   |    | EPSDT Nursing Care in Home/LPN                       | NOVA | \$27.03 | \$28.67 | 6.0%  |
| S9124   |    | EPSDT Nursing Care in Home/LPN                       | ROS  | \$22.29 | \$23.65 | 6.0%  |
| S5126   |    | Consumer Directed Personal Assistance/Attendant Care | NOVA | \$11.47 | \$11.70 | 2.0%  |
| S5126   |    | Consumer Directed Personal Assistance/Attendant Care | ROS  | \$8.86  | \$9.04  | 2.0%  |
| S5150   |    | Consumer-Directed Respite Services                   | NOVA | \$11.47 | \$11.70 | 2.0%  |
| S5150   |    | Consumer-Directed Respite Services                   | ROS  | \$8.86  | \$9.04  | 2.0%  |
| S5136   |    | CD - Companion Services                              | NOVA | \$11.47 | \$11.70 | 2.0%  |
| S5136   |    | CD - Companion Services                              | ROS  | \$8.86  | \$9.04  | 2.0%  |
| S5135   |    | Companion Services                                   | NOVA | \$15.20 | \$15.50 | 2.0%  |
| S5135   |    | Companion Services                                   | ROS  | \$12.91 | \$13.17 | 2.0%  |
| T1005   |    | Respite Care   | NOVA | \$15.20 | \$15.50 | 2.0%  |
| T1005   |    | Respite Care   | ROS  | \$12.91 | \$13.17 | 2.0%  |
| T1019   |    | Personal Care  | NOVA | \$15.20 | \$15.50 | 2.0%  |
| T1019   |    | Personal Care  | ROS  | \$12.91 | \$13.17 | 2.0%  |

\*Rate for congregate residential services only; sponsored residential services must be billed under procedure code T2033 effective July 1, 2015.



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\*\*Quarter hour rates

NOVA=Northern Virginia ROS=Rest of State

## Changes in NOVA and ROS Rate Regions

For the purposes of billing Medicaid for HCBS and EPSDT nursing and personal care/ respite services, the Commonwealth of Virginia is divided into two localities, Northern Virginia (NOVA) and the Rest of the State (ROS). Effective July 1, 2015, Culpeper (FIPS Code 047) and Rappahannock (FIPS Code 157) Counties will change from the ROS reimbursement rates to the NOVA reimbursement rates for Medicaid Services. The locality used for reimbursement is based on the address of the member receiving services. The services and rates affected by this policy change will be updated accordingly in the DMAS Provider Manuals located on the DMAS website ([www.dmas.virginia.gov](http://www.dmas.virginia.gov)).

This policy change follows the recent publication of revised Metropolitan Statistical Areas (MSAs) by the Office of Management and Budget (OMB) in the February 2013 OMB Bulletin No. 13-01. The Centers for Medicare and Medicaid Services (CMS) adopted the new MSAs for Home Health reimbursement purposes for federal fiscal year 2015. DMAS regulations require the Department to use the Virginia localities that are included in the Washington D.C./Virginia/Maryland metropolitan core-based statistical area used by CMS for Home Health reimbursement for its NOVA home health rate region. In the most recent CMS Home Health reimbursement regulations, the counties of Culpeper and Rappahannock were moved from a non-metropolitan area to the Washington D.C./Virginia/Maryland metropolitan core-based statistical area. The same localities are also used for HCBS and EPSDT services.

Listed below are the localities and their corresponding FIPS (Federal Information Processing Service) Codes, which will define the DMAS NOVA area for HCBS reimbursement, effective July 1, 2015:

Alexandria City - 510  
Arlington County - 013  
Clarke County - 043  
Culpeper County - 047  
Fairfax City - 600

Loudoun County - 107  
Manassas City - 683  
Manassas Park City - 685  
Prince William County - 153  
Rappahannock County - 157



Department of Medical Assistance Services  
600 East Broad Street  
Suite 1300  
Richmond, VA 23219

<https://dmas.virginia.gov>

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|                           |                           |
|---------------------------|---------------------------|
| Fairfax County - 059      | Spotsylvania County - 177 |
| Falls Church City - 610   | Stafford County - 179     |
| Fauquier County - 061     | Warren County - 187       |
| Fredericksburg City - 630 |                           |



## **COMMONWEALTH COORDINATED CARE**

Commonwealth Coordinated Care (CCC) is a new program that is coordinating care for thousands of Virginians who have both Medicare and Medicaid and meet certain eligibility requirements. Please visit the website at [http://www.dmas.virginia.gov/Content\\_pgs/altc-enrl.aspx](http://www.dmas.virginia.gov/Content_pgs/altc-enrl.aspx) to learn more.

## **MANAGED CARE ORGANIZATIONS**

Many Medicaid recipients are enrolled with one of the Department's contracted Managed Care Organizations (MCO). In order to be reimbursed for services provided to an MCO enrolled individual, providers must follow their respective contract with the MCO. The MCO may utilize different prior authorization, billing, and reimbursement guidelines than those described for Medicaid fee-for-service individuals. For more information, please contact the MCO directly. Additional information about the Medicaid MCO program can be found at [http://www.dmas.virginia.gov/Content\\_pgs/mc-home.aspx](http://www.dmas.virginia.gov/Content_pgs/mc-home.aspx).

## **VIRGINIA MEDICAID WEB PORTAL**

DMAS offers a web-based Internet option to access information regarding Medicaid or FAMIS member eligibility, claims status, payment status, service limits, service authorizations, and electronic copies of remittance advices. Providers must register through the Virginia Medicaid Web Portal in order to access this information. The Virginia Medicaid Web Portal can be accessed by going to: [www.virginiamedicaid.dmas.virginia.gov](http://www.virginiamedicaid.dmas.virginia.gov). If you have any questions regarding the Virginia Medicaid Web Portal, please contact the

Xerox State Healthcare Web Portal Support Helpdesk, toll free, at 1-866-352-0496 from 8:00 a.m. to 5:00 p.m. Monday through Friday, except holidays. The MediCall audio response system provides similar information and can be accessed by calling 1-800-884- 9730 or 1-800-772-9996. Both options are available at no cost to the provider. Providers may also access service authorization information including status via KEPRO's Provider Portal at <http://dmas.kepro.com>.

## **"HELPLINE"**



Department of Medical Assistance Services  
600 East Broad Street  
Suite 1300  
Richmond, VA 23219

<https://dmas.virginia.gov>

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The "HELPLINE" is available to answer questions Monday through Friday from 8:00 a.m. to 5:00 p.m., except on holidays. The "HELPLINE" numbers are:

1-804-786-6273 Richmond area and out-of-  
state long distance 1-800-552-8627 All other  
areas (in-state, toll-free long distance)

Please remember that the "HELPLINE" is for provider use only. Please have your Medicaid Provider Identification Number available when you call.